

New Jersey Department of Environmental Protection Division of Water Supply and Geoscience Bureau of Water Allocation and Well Permitting

APPLICATION FOR NEW JERSEY WELL DRILLER LICENSE

Please check the license that you are applying for:

| Master □ | ☐ Dewatering |
|---------------------------------------|-----------------------------------|
| Journeyman □ | ☐ Vertical Closed Loop Geothermal |
| Journeyman (Class B) □ | ☐ Elevator Borehole |
| Environmental Resource & Geotechnical | |

The Process:

Once the applicant has successfully passed all required National Groundwater Association (NGWA) technical exams, the NJ regulations exam for the appropriate license type and met the appropriate experience requirements, they must fully complete this application, making sure to enclose all necessary documentation, and send it to the address below:

New Jersey Department of Environmental Protection
Division of Water Supply and Geoscience
Bureau of Water Allocation and Well Permitting
Mail Code 401-04Q
PO Box 420
Trenton, New Jersey 08625-0420

Appendix A contains a table which details the certification exams and experience requirements for each license type. All well driller license applications must be reviewed by the New Jersey State Well Drillers and Pump Installers Examining and Advisory Board (Board). The Board meets six times per year and has conference calls on the off months to certify license applicants.

Once the Board reviews the applications, a staff member from the New Jersey Department of Environmental Protection (Department) will contact you and notify you of the status of your application.

Scheduling an Exam:

To schedule an exam, visit https://test-takers.psiexams.com/ngwa. Click on the View Available Tests button and the list of available exams will be displayed. Click on the exam that you need to take and then click on the Login/Register button to complete the registration process. Exams may also be scheduled by calling PSI at (855) 579-4642.

Additional exam information may be obtained by visiting NGWA's website: https://www.ngwa.org/advance-your-career/certification/contractor-certification/certification-exams. Study material for the technical exam modules (general drilling, drilling method specialty exams, water systems general, water systems greater or less than 100 GPM) is provided on this site. Study material for the NJ regulations exams for each license type may be found at: https://www.state.nj.us/dep/watersupply/g_boards_le.html.



APPLICATION FOR NEW JERSEY WELL DRILLER LICENSE

Under the provisions of N.J.S.A. 58:4A-4.1 et seq.

Please type or print clearly

PART A – GENERAL INFORMATION Section A-1: Contact Information

| Section A-1: Contact Information | | | |
|--|-----------------|---------------------------------------|-----------------------------|
| Last Name: | | First Name: | |
| Middle Initial: Suffix: | | Date of Birth | ; |
| Street Address: | | | |
| City: | State: | · · · · · · · · · · · · · · · · · · · | Zip Code: |
| Daytime Phone No. () | | Phone Type: | □ Home □ Work □ Cell |
| Alternate Phone No. () | | _ Phone Type: | □ Home □ Work □ Cell |
| Current Employer: | | | |
| Last 4 Digits of Social Security No. | <i>E</i> | Email Address: | |
| Applicant is subject to examination before | the Board under | r the provisions of N | J.S.A. 58:4A-10. |
| needed for licensure as a New Jersey licens List any high school, college, university, vo | | · business school atte | nded. |
| NAME & LOCATION OF SCHOOL | MAJOR A | REA OF STUDY | DATES ATTENDED |
| | | | From: |
| | | | To: |
| | | | From: |
| | | | То: |
| Section A-3: Certification Exams Check all that apply: | | | |
| General Drilli | ng □ | ☐ Vertical | Closed Loop Drilling (VCL) |
| Augering and Monitori | • | • | ystems General Exam |
| Cable Tool Drilli | • | • | ystems less than 100 gpm |
| Air Rotary Drilli | • | | ystems greater than 100 gpm |
| Mud Rotary Drilli | C | ☐ NJ Regu | lations for (write in |
| Reverse Circulation Drilli | nσ Π | | |

Provide a copy of the exam vendor issued test report results sheet for each certification exam that is checked off.

In accordance with N.J.A.C. 7:9D-1.8(a)3, the New Jersey Regulations exam for the applicable license class shall have been taken no more than two years prior to submitting this application.

NAME, ADDRESS & TELEPHONE

NO. OF EMPLOYER



DATES EMPLOYED

<u>PART B – DOCUMENTATION AND EXPLANATION OF WORK EXPERIENCE</u> (Attach additional sheets if necessary)

DESCRIBE YOUR DUTIES

& RESPONSIBILITIES

Fill in your prior work experience as it relates to the installation, maintenance and decommissioning of wells. All applicants must indicate the month, day and year for each employment date listed.

| | | From | |
|--|--|--|---|
| | | То | |
| | | From | |
| | | То | |
| | | From | |
| | | То | |
| List all pertinent information Type of N.J. License | on regarding your New Jersey V N.J. License No. | Vell Driller/Pump Installer licer Date Issued (Mo./Yr.) | nse, if you currently hold one Expiration Date |
| | | | |
| Do you possess any out-of- | state Well Driller or Pump Insta | aller license(s)? Yes □ | No □ |
| If Yes, please list below and | d attach copy of your license. | | |
| State Issued | License Number | Date Issued (Mo./Yr.) | Expiration Date |
| | | | |
| | | | |
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<u>NEW JERSEY WELL DRILLING EXPERIENCE</u> (To be completed by well driller applicants with **in-state experience only**)

You <u>must</u> list five permitted wells or borings you have obtained experience with during construction or decommissioning within the last five (5) years as of <u>the signature date on the application</u>.

The five wells/borings listed <u>must</u> correspond to your Reference Questionnaires as described in the instruction sheet later in the application. The names of the New Jersey Licensed Well Drillers who supervised your work must appear on the submitted well records/well decommissioning reports.

| N.J. WELL PERMIT NO. | NJ LICENSED WELL DRILLER WHO SUPERVISED YOUR WORK | WELL USE (TYPE OF WELL) | DATE OF DRILLING | DEPTH OF WELL/ BORING | METHOD OF DRILLING/ DECOMMISSION- ING |
|-------------------------|--|-------------------------------|---------------------|--------------------------------|--|
| | | | | | |
| | | | | | |
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| | | | | | |

<u>OUT-OF-STATE WELL DRILLING EXPERIENCE:</u> (To be completed by well driller applicants with **out-of-state experience only**)

You <u>must</u> list five wells or borings you have obtained work experience with during construction or decommissioning within the last five (5) years as of <u>the signature date on the application</u>.

These five wells/borings listed must correspond to your Reference Questionnaires described in the instruction sheet.

| WELL USE (TYPE OF WELL) | WELL DRILLER WHO SUPERVISED YOUR WORK OR INDIVIDUAL WHO CAN VERIFY YOUR WORK IF YOU ARE A WELL DRILLER | DEPTH OF WELL/ BORING | DATE OF DRILLING | METHOD OF DRILLING/ DECOMMISSION- ING |
|----------------------------|--|--------------------------|---------------------|--|
| | | | | |
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Attach a copy of any of the current NGWA Certification(s) you hold and provide the following information:

| NGWA Certification No. | Category(s) |
|------------------------|-------------|
| | |
| | |

PART C – VERIFICATION OF WORK EXPERIENCE AND REFERENCE QUESTIONNAIRES

For the five wells that you listed in Part B, include any applicable well records, well decommissioning reports, and/or boring logs which verify your work experience. Additional verification of work experience can come in the form of tax records, invoices, copies of out-of-state licenses, company registrations, or W-2 forms.

Please list the names and pertinent information of the two references who will verify your work experience on the wells listed above in Part B of this application. Each of these two references <u>must</u> complete and notarize a Reference Questionnaire or your application will be rejected. You may need to add additional references to cover the minimum number of required years of drilling experience if you have either changed employers or worked under the supervision of multiple licensed well drillers.

New Jersey Experienced Applicants Only: One of your two references <u>must</u> be a New Jersey licensed Well Driller who was adequately licensed to supervise the work that you completed¹. The well driller(s) of record whose name and New Jersey Well Driller license number appear on the State well record/well decommissioning report forms submitted as per Part B above must be the well driller(s) who supervised your work and must also be the individual(s) listed as your reference(s) on forms ADM-365.

| NAME | ADDRESS | PHONE NUMBER | N.J. WELL DRILLER LICENSE # (if applicable) |
|------|---------|--------------|---|
| | | | |
| | | | |

¹ Master Well Driller Applicants: the listed references do not need to be New Jersey licensed well drillers since well driller experience qualifications require applicants to have been licensed as a New Jersey Journeyman license for a minimum of two (2) years.





PART D – OATH OF APPLICANT

I, the undersigned applicant, certify under penalty of law that the information provided in this document is true, accurate and complete. I am aware that there are significant civil and criminal penalties for submitting false, inaccurate or incomplete information, including fines and/or imprisonment.

| | Signature of Appli | cant | Date |
|--|--------------------|-----------------|------|
| State of | County of | | |
| Sworn to and subscribed before me this | day of | 20 | |
| Notary Public | _ | (Official Seal) | |

New Jersey Department of Environmental Protection Division of Water Supply and Geoscience Bureau of Water Allocation and Well Permitting

INSTRUCTIONS FOR COMPLETING THE REFERENCE QUESTIONNAIRE AND VERIFICATION OF WELL DRILLING EXPERIENCE

- 1. The minimum amount of total years of supervised experience varies by license type (see Appendix A for experience requirements by license type). More than one reference questionnaire signed and certified by a licensed well driller of the proper class may be necessary to cover the minimum required experience. If you have worked for more than one licensed person, check to make sure the number of months reported by the reference in the table equal the total number of years and months reported at the bottom of the page.
- 2. You may include a separate letter from one of the listed references that further describes your work experience in addition to the required Reference Questionnaire Form. While attaching this letter is optional, you may choose to do so to expand upon or clarify any information related to your work experience.

New Jersey Department of Environmental Protection Division of Water Supply and Geoscience Bureau of Water Allocation and Well Permitting

REFERENCE QUESTIONNAIRE AND VERIFICATION OF EXPERIENCE

(Note to applicants: each reference may attach a separate letter describing periods of supervised work provided this form is completed and notarized)

Please type or print clearly

| | Name Work Experience | | |
|----|--|---|---|
| 1. | supervised or worked with the ap | plicant <u>intermittently</u> (such as perirupted for military leave or school, | ised or worked with the applicant. If you iods of time when the applicant worked worked for another employer or other), |
| | From (specify year/month) | To (specify year/month) | Total Months Supervised |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 2. | State the total years and months based on the information reported | | the applicant in well drilling activities |
| | Years: | Months: | |

3. List the well drilling operations for which you have supervised or worked with the applicant.

Please list as follows:

| Well Use (Type of Well) | Depth of Well | Drilling Method | Date Drilled | N.J. Well Permit No. (if applicable) |
|----------------------------|---------------|-----------------|--------------|---|
| | | | | |
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A **total** of five (5) wells must be listed between all combined reference questionnaires.

S

| Section B: Notarized Oath of Reference | |
|---|--|
| I hereby certify that the information provided in t | his questionnaire is true to the best of my knowledge and belief |
| | Name of Defauer as (Places Drint) |
| | Name of Reference (Please Print) |
| | Signature of Reference |
| | |
| | N.J. Well Driller's License # (if applicable) |
| Sworn to and subscribed before me this day | |
| of A.D. 20 | |
| | (Official Seal) |
| Signature of Notary Public | _ |

New Jersey Department of Environmental Protection Division of Water Supply and Geoscience Bureau of Water Allocation and Well Permitting

REFERENCE QUESTIONNAIRE AND VERIFICATION OF EXPERIENCE

(Note to applicants: each reference may attach a separate letter describing periods of supervised work provided this form is completed and notarized)

Please type or print clearly

| supervised or worked with the app | onth and year that you have supervelicant intermittently (such as periputed for military leave or school, work. | ods of time when the applicant w |
|-----------------------------------|---|----------------------------------|
| From (specify year/month) | To (specify year/month) | Total Months Supervised |
| | | |
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| | | |
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| | | |

3. List the well drilling operations for which you have supervised or worked with the applicant.

Please list as follows:

| Well Use (Type of Well) | Depth of Well | Drilling Method | Date Drilled | N.J. Well Permit No. (if applicable) |
|----------------------------|---------------|-----------------|--------------|---|
| | | | | |
| | | | | |
| | | | | |
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| | | | | |

A **total** of five (5) wells must be listed between all combined reference questionnaires.

S

| I hereby certify that the information provided in the | his questionnaire is true to the best of my knowledge and i |
|---|---|
| | Name of Reference (Please Print) |
| | Signature of Reference |
| | N.J. Well Driller's License # (if applicable) |
| Sworn to and subscribed efore me this day | |
| f A.D. 20 | |
| | (Official Seal) |

Table 1

| License Type | | Required Proficiency as Demonstrated by Certification Exams | Required Experience |
|-------------------------|--|---|--|
| driller Jour | icensed as a rneyman well ler on or after nuary 2, 2018 | ❖ General Drilling; ❖ Augering and Monitoring; ❖ <u>Two</u> of the following: Cable Tool, Air Rotary, Mud Rotary, or Reverse Circulation; ❖ Water Systems General Exam; ❖ Water Systems < 100 gpm; ❖ Water Systems > 100 gpm; ❖ NJ Regulations for Masters. | Five years experience, including two years as a Journeyman well driller; experience must include construction or decommissioning of five wells from Category 1, 2, or 3 within the preceding five years from the date of application. |
| Jou | icensed as a rneyman well r before January 2, 2018 | One of the following: Cable Tool, Air Rotary, Mud Rotary, or Reverse Circulation; Water Systems > 100 gpm; NJ Regulations for Masters. | Five years experience, including two years as a Journeyman well driller; experience must include construction or decommissioning of five wells from Category 1, 2, or 3 within the preceding five years from the date of application. |
| Journeyman well driller | | ❖ General Drilling; ❖ Augering and Monitoring; ❖ One of the following: Cable Tool, Air Rotary, Mud Rotary, or Reverse Circulation; ❖ Water Systems General Exam; ❖ One of the following: Water Systems < 100 gpm, or Water Systems > 100 gpm; ❖ NJ Regulations for Journeyman. | Three years experience under the supervision of an ERG, Journeyman (Class B), Journeyman, Master, or VCLG well driller; experience must include construction or decommissioning of five wells from Category 1, 2, or 3 within the preceding five years from the date of application. |

| License Type | Required Proficiency as Demonstrated by Certification Exams | Required Experience |
|---|---|---|
| Journeyman (Class B) well driller | General Drilling; One of the following: Cable Tool, Air Rotary, Mud Rotary, or Reverse Circulation; Water Systems General Exam; One of the following: Water Systems < 100 gpm, or Water Systems > 100 gpm; NJ Regulations for Journeyman (Class B). | Three years experience under the supervision of an ERG, Journeyman (Class B), Journeyman, Master or VCLG well driller; experience must include construction or decommissioning of five wells from Category 1, 2, or 3 within the preceding five years from the date of application. |
| Environmental Resource and Geotechnical (ERG) well driller | General Drilling; Augering and Monitoring; NJ Regulations for ERG drilling. | Two years experience under the supervision of an ERG, Journeyman (Class B), Journeyman, Master or VCLG well driller; experience must include construction or decommissioning of five wells within the preceding five years from the date of application. |
| Dewatering well driller | General Drilling; NJ Regulations & Technical for Dewatering. | Two years experience under the supervision of a Dewatering, Journeyman (Class B), Journeyman, Master or ERG well driller; experience must include construction or decommissioning of five wells within the preceding five years from the date of application. |

| License Type | Required Proficiency as Demonstrated by Certification Exams | Required Experience | |
|---|---|---|--|
| Vertical Closed Loop Geothermal (VCLG) well driller | ❖ General Drilling; ❖ Vertical Closed Loop Drilling; ❖ One of the following: Cable Tool, Air Rotary, Mud Rotary, or Reverse Circulation; ❖ NJ Regulations for VCLG drilling. | Two years experience under the supervision of a VCLG, Journeyman (Class B), Journeyman, Master or ERG well driller; experience must include construction or decommissioning of five wells within the preceding five years from the date of application. | |
| Elevator Borehole well driller | General Drilling; NJ Regulations for Elevator boreholes. | Two years experience drilling elevator boreholes; Effective January 2, 2020, the applicant must demonstrate that the experience has been obtained under the supervision of a Master, Journeyman, Journeyman (Class B), or Elevator Borehole well driller. | |

Appendix B

These checklists are meant to give the applicant a clear idea of the requirements for each license type. This checklist is only for the applicant and does not need to be sent in with the completed application.

Master Well Driller (Licensed as a JD on or after 1/2/2018)

| I. | Exams | | | | | |
|------|---|---------------------------------|--|--|--|--|
| | A. General Drilling | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | B. Augering and Monitoring | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | C. <u>Two</u> of the following exams are required | | | | | |
| | i. Cable Tool | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | ii. Air Rotary | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | iii. Mud Rotary | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | iv. Reverse Circulation | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | D. Water Systems General Exam | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | E. Water Systems < 100 gpm | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | F. Water Systems > 100 gpm | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | G. NJ Regulations for Masters | Date Completed: | | | | |
| | | Attached Copy of Score Sheet: □ | | | | |
| | | | | | | |
| II. | Experience | | | | | |
| | A. 5 years of experience | From: To: From: To: | | | | |
| | i. 2 years as a Journeyman Well Driller: | From: 10: | | | | |
| | B. Completed the construction or decommissioning of 5 wells from category 1, 2, or 3.i. Permit Number: | | | | | |
| | Attached Copy of Well Record or Well Decor | | | | | |
| | ii. Permit Number: | | | | | |
| | Attached Copy of Well Record or Well Decor | nmissioning Report: | | | | |
| | iii. Permit Number: | | | | | |
| | Attached Copy of Well Record or Well Decor | | | | | |
| | iv. Permit Number: | | | | | |
| | Attached Copy of Well Record or Well Decor | | | | | |
| | v. Permit Number: | Date Completed: | | | | |
| | Attached Copy of Well Record or Well Decor | | | | | |
| III. | References | | | | | |
| 111. | A. Are two references attached? | | | | | |
| | i. Name of Reference: | | | | | |
| | Is the reference material attached? □ | _ | | | | |
| | ii. Name of Reference: | | | | | |
| | Is the reference material attached? | | | | | |

Master Well Driller (Licensed as a JD before 1/2/2018)

| I. | Exams | | | | |
|------|--|---------------------------------|--|--|--|
| | A. One of the following exams are required | | | | |
| | i. Cable Tool | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | ii. Air Rotary | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | iii. Mud Rotary | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | iv. Reverse Circulation | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | B. Water Systems > 100 gpm | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | C. NJ Regulations for Masters | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | | | | | |
| II. | Experience | | | | |
| | A. 5 years of experience | From: To: From: To: | | | |
| | i. 2 years as a Journeyman Well Driller:B. Completed the construction or decommissioning of | From: 1o: | | | |
| | i. Permit Number: | | | | |
| | Attached Copy of Well Record or Well Decor | | | | |
| | | | | | |
| | ii. Permit Number: Date Completed: Attached Copy of Well Record or Well Decommissioning Report: □ | | | | |
| | | Date Completed: | | | |
| | Attached Copy of Well Record or Well Decor | | | | |
| | iv. Permit Number: | | | | |
| | Attached Copy of Well Record or Well Decor | | | | |
| | v. Permit Number: | | | | |
| | Attached Copy of Well Record or Well Decor | mmissioning Report: | | | |
| | | <i></i> | | | |
| III. | References | | | | |
| | A. Are two references attached? | | | | |
| | i. Name of Reference: | | | | |
| | Is the reference material attached? \Box | | | | |
| | ii. Name of Reference: | | | | |
| | Is the reference material attached? \Box | | | | |

Journeyman Well Driller

| I. | Exams | | | | |
|------|---|---------------------------------|--|--|--|
| | A. General Drilling | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | B. Augering and Monitoring | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | C. One of the following exams are required | - | | | |
| | i. Cable Tool | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | ii. Air Rotary | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | iii. Mud Rotary | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | iv. Reverse Circulation | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | D. Water Systems General Exam | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | E. One of the following exams are required | | | | |
| | i. Water Systems < 100 gpm | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | ii. Water Systems > 100 gpm | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | F. NJ Regulations for Journeyman | Date Completed: | | | |
| | | Attached Copy of Score Sheet: □ | | | |
| | | | | | |
| II. | Experience |) T | | | |
| | A. 3 years of experience (with appropriate supervision | n) From: To: | | | |
| | B. Completed the construction or decommissioning o | | | | |
| | i. Permit Number:Attached Copy of Well Record or Well Decord | Date Completed: | | | |
| | = T | | | | |
| | ii. Permit Number: | | | | |
| | Attached Copy of Well Record or Well Dece | | | | |
| | iii. Permit Number: | | | | |
| | Attached Copy of Well Record or Well Deco iv. Permit Number: | Date Completed: | | | |
| | | | | | |
| | Attached Copy of Well Record or Well Decommissioning Report: □ v. Permit Number: Date Completed: | | | | |
| | v. Permit Number: Attached Copy of Well Record or Well Deco | • | | | |
| | Anached Copy of well Record of Well Deco | ommissioning Report. 🗆 | | | |
| III. | References | | | | |
| , | A. Are two references attached? | | | | |
| | i. Name of Reference: | | | | |
| | Is the reference material attached? □ | | | | |
| | ii. Name of Reference: | | | | |

Is the reference material attached? \Box

Journeyman (Class B) Well Driller

| I. | Exams | | | | | | |
|------|--|---|---------------------------------|--|--|--|--|
| | A. Genera | al Drilling | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| | B. One of | f the following exams are required | | | | | |
| | i. | Cable Tool | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| | ii. | Air Rotary | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| | iii. | Mud Rotary | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| | iv. | Reverse Circulation | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| | C. Water | Systems General Exam | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| | | f the following exams are required | | | | | |
| | i. | Water Systems < 100 gpm | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| | ii. | Water Systems > 100 gpm | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| | E. NJ Reg | gulations for Journeyman (Class B) | Date Completed: | | | | |
| | | | Attached Copy of Score Sheet: □ | | | | |
| ** | ъ. | | | | | | |
| II. | Experience | | on) From To | | | | |
| | R Compl | A. 3 years of experience (with appropriate supervision) From: To:B. Completed the construction or decommissioning of 5 wells from category 1, 2, or 3. | | | | | |
| | i. | i. Permit Number: Date Completed: | | | | | |
| | | Attached Copy of Well Record or Well Decommissioning Report: | | | | | |
| | ii. Permit Number: Date Completed: | | | | | | |
| | Attached Copy of Well Record or Well Decommissioning Report: | | | | | | |
| | iii. Permit Number: Date Completed: | | | | | | |
| | Attached Copy of Well Record or Well Decommissioning Report: | | | | | | |
| | | Permit Number: | | | | | |
| | Attached Copy of Well Record or Well Decommissioning Report: | | | | | | |
| | | Permit Number: | _ Date Completed: | | | | |
| | | Attached Copy of Well Record or Well Dec | commissioning Report: | | | | |
| | | | | | | | |
| III. | References | | | | | | |
| | | vo references attached? | | | | | |
| | | Name of Reference: | | | | | |
| | | Is the reference material attached? | | | | | |
| | íi. | Name of Reference: | | | | | |

Is the reference material attached? \Box

Environmental Resource & Geotechnical Well Driller (ERG)

| I. | Exams | |
|------|---|---------------------------------|
| | A. General Drilling | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | B. Augering and Monitoring | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | C. NJ Regulations for ERG | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| II. | Experience | |
| | A. 2 years of experience (with appropriate supervision | |
| | B. Completed the construction or decommissioning of | |
| | i. Permit Number: | |
| | Attached Copy of Well Record or Well Decor | |
| | ii. Permit Number: | |
| | Attached Copy of Well Record or Well Decor | |
| | iii. Permit Number: | |
| | Attached Copy of Well Record or Well Decor | e 1 |
| | iv. Permit Number: | |
| | Attached Copy of Well Record or Well Decor | |
| | v. Permit Number: | Date Completed: |
| | Attached Copy of Well Record or Well Decor | mmissioning Report: |
| III. | References | |
| | A. Are two references attached? | |
| | i. Name of Reference: | |
| | Is the reference material attached? \Box | |
| | ii. Name of Reference: | |
| | Is the reference material attached? □ | |

Dewatering Well Driller

| I. | Exams | | |
|------|--|---------------------|--------------|
| | A. General Drilling | Date Completed: | |
| | | Attached Copy of | Score Sheet: |
| | B. NJ Regulations & Technical for Dewatering | Date Completed: | |
| | | Attached Copy of | Score Sheet: |
| II. | Experience | | |
| | A. 2 years of experience (with appropriate supervision) | From: | To: |
| | B. Completed the construction or decommissioning of 5 w | vells. | |
| | i. Permit Number: | Date Completed: | |
| | Attached Copy of Well Record or Well Decomm | |] |
| | ii. Permit Number: | Date Completed: | |
| | Attached Copy of Well Record or Well Decomm | issioning Report: [|] |
| | iii. Permit Number: | Date Completed: | |
| | Attached Copy of Well Record or Well Decomm | issioning Report: [|] |
| | iv. Permit Number: | Date Completed: | |
| | Attached Copy of Well Record or Well Decomm | issioning Report: [|] |
| | v. Permit Number: | Date Completed: | |
| | Attached Copy of Well Record or Well Decomm | issioning Report: |] |
| III. | References | | |
| | A. Are two references attached? | | |
| | i. Name of Reference: | | |
| | Is the reference material attached? \Box | | |
| | ii. Name of Reference: | | |
| | Is the reference material attached? \Box | | |

Vertical Closed Loop Geothermal Well Driller (VCLG)

| I. | Exams | |
|------|---|-----------------------------------|
| | A. General Drilling | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | B. Vertical Closed Loop Drilling | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | C. One of the following exams are required | |
| | i. Cable Tool | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | ii. Air Rotary | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | iii. Mud Rotary | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | iv. Reverse Circulation | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | D. NJ Regulations for VCLG | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | | |
| II. | Experience | . |
| | A. 2 years of experience (with appropriate supervision | |
| | B. Completed the construction or decommissioning of i. Permit Number: | |
| | Attached Copy of Well Record or Well Deco | Date Completed. |
| | ii. Permit Number: | |
| | Attached Copy of Well Record or Well Deco | mmissioning Penart: |
| | iii. Permit Number: | C 1 |
| | Attached Copy of Well Record or Well Deco | ammissioning Report: |
| | iv. Permit Number: | |
| | Attached Copy of Well Record or Well Deco | ammissioning Report: |
| | v. Permit Number: | |
| | Attached Copy of Well Record or Well Deco | ommissioning Report: |
| | rituation copy of won resourt of wen poor | ministroning response \triangle |
| III. | References | |
| | A. Are two references attached? | |
| | i. Name of Reference: | |
| | Is the reference material attached? \Box | |
| | ii. Name of Reference: | |
| | Is the reference material attached? \Box | |

Elevator Borehole Driller

| I. | Exams | |
|------|---|---------------------------------|
| | A. General Drilling | Date Completed: |
| | | Attached Copy of Score Sheet: □ |
| | B. NJ Regulations for Elevator Boreholes | Date Completed: |
| | | Attached Copy of Score Sheet: |
| II. | Experience * | |
| | A. 2 years of experience (with appropriate supervision) | From: To: |
| | B. Completed the construction or decommissioning of 5 wells. | |
| | i. Permit Number (if applicable): | Date Completed: |
| | ii. Permit Number (if applicable): | Date Completed: |
| | iii. Permit Number (if applicable): | Date Completed: |
| | iv. Permit Number (if applicable): | Date Completed: |
| | v. Permit Number (if applicable): | Date Completed: |
| III. | References | |
| 111. | A. Are two references attached? | |
| | i. Name of Reference: | |
| | | |
| | Is the reference material attached? □ | |
| | ii. Name of Reference: | |
| | Is the reference material attached? \Box | |